

Epidemiology and Prevention of Vaccine-Preventable Diseases:

Errata

The Pink Book, 8th Edition

2nd Printing (January 2005)

Pneumococcal Chapter

Cochlear implants were inadvertently omitted from this chapter as an indication for pneumococcal vaccines. Persons who are cochlear implant recipients or candidates should receive age-appropriate pneumococcal vaccination with 7-valent pneumococcal conjugate and/or 23-valent pneumococcal polysaccharide vaccine, according to the ACIP schedules for persons at high risk. For more information, see MMWR Vol. 52 No. 31, pp. 739-40, August 8, 2003.

1st Printing (January 2004)

The following errors were found in the first printing of the 8th edition of Epidemiology and Prevention of Vaccine-Preventable Diseases, the Pink Book. They have been corrected in the 2nd (January 2005) printing.

General Recommendations Chapter: page 11

In the second slide panel (Spacing of live vaccines . . .), the second bullet states “Exception is yellow fever vaccine given <4 weeks days after measles vaccine.” The word “days” is in error; it should say “<4 weeks.” Corresponding information in the chapter’s text is correct.

Pertussis Chapter: page 81

In the third slide panel (DTaP Clinical Trials), the vaccine efficacy data are transposed for Infanrix and Tripedia. In the Italian Infanrix trials efficacy was 84% with a 76-89% confidence interval, and in the German Tripedia trials efficacy was 80% with a confidence interval of 59-90%.

Hib Chapter: page 108

In the table (Detailed Vaccination Schedule . . .), the cell describing the booster dose of PRP-OMP when the first dose was given at 12-14 months (3rd column, 7th row) is wrong. It states that no booster is recommended. In fact, a booster dose is recommended at 2 months after the primary dose. The contents of this cell should read “Two months later.” Corresponding information in the chapter’s text is correct.

Hepatitis A Chapter: page 184 and Hepatitis B Chapter: page 210

The text states that the minimum interval separating the second and third doses of Twinrix is 8 weeks. This is not correct. The minimum interval between the second and third doses of Twinrix is 5 MONTHS. The first and last doses of Twinrix should be separated by at least 6 months.

Meningococcal Disease Chapter: page 254

The second paragraph under “Vaccine Storage and Handling” states that multidose vials must be discarded 10 days after reconstitution. It should read “35 days after reconstitution.”

Smallpox Chapter: page 278

The slide panel titled “Vaccine Storage and Handling” incorrectly states that reconstituted vaccine must be used within 30 days. This should read “90 days,” as it does in the accompanying text.

Appendix D: page D2

The table of immunobiologicals manufacturers and distributors contains outdated information.